## Y PART B - ISSUE FEE (S) TRANSMITTAL Complete and may this form, together with applicable fees, to: **Box ISSUE FEE Assistant Commissioner for Patents** MAY 1 9 2009 Washington, D.C. 20231

Washington, D.C. 20231

\*\*\*LLING INSTRUCTION This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence in lifeting the Patent, assembly orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address as indicated unless corrected below or directed otherwise

REED SMITH LLP **SUITE 1400** 3110 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate

Certificate of Mailing

I hereby certify that this Issue Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelop addressed to the Box Issue Fee address on the date indicated below.

							<u> </u>			(Depositor's name)		
							<u> </u>			(Signature) (Date)		
APPLICATION NO FILIN		G DATE		FIRST NAMED INVENTOR		NTOR	ATTORNEY D	OOCKET NO.	CONFIRMATION NO.			
10/785,110 02/25		5/2004		Yusaku Yamamoto		noto	NITT.0193		8797			
TITLE OF INVENTION:	PARALL	EL FAST FO	OURIER TRA	ANSFOR	MATION N	ЛЕТН	OD OF	CONCEALED-CO	OMMUNICATI	ON TYPE		
APPLN. TYPE	PLN. TYPE SMALL ENTITY		ISSUE FEE		PUBLICATION FEE			TOTAL FEE(S) DUE DATE DUE				
nonprovisional NO			\$1,510 \$3		\$300	00		61,810 06/10/2009		)		
EXAMINER			ART UNIT	CLASS - S								
NGO, CHUONG I	).		2193	708-401000								
1 Change of correspondence address or indication of □Fee Address* (37 CFR §1.363). Use of PTO form(s) and Customer Number are recommended, but not required.  □: Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.							2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)												
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.												
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)												
Hitachi, Ltd.								Tokyo, Japan				
Titueiii, Eta.							lonyo	, oapan				
Please check the app		e category (will not	be printed on the p	natent) 🗆 indi	vidual 🗵				government			
4a. The following fees a	re enclosed:					4b.	Paymen	t of Fee(s):				
	Issue fee					$\boxtimes$	A check in the amount of the fee(s) is enclosed.					
Publication Fee							Paymen	t by credit card. For	m PTO-2038 is at	ttached		
Advance Order - # of Copies: 3												
								The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1480 (enclose an				
							extra co	py of this form).	•	tumber 08-1480 (chelose air		
The COMMISSIONER OF	PATENTS ANI				ee and Publication	on Fee (i	f any) to th	e application identified above	ve.			
(Authorized Signature)		(Da	ite) May 19,	2009								
		$\mathcal{L}$	//				$\perp$					
Juan Carlos A. Maro	uez Reg. N	No. 34.072	MA.				2					
Juan Carlos A. Marquez Reg. No. 34.677  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered patent attorney or agent; or the assigned of other party in interest asshown by the records of the Patent and Trademark Office												
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless displays a valid OMB control number												
TRANSMIT THIS FORM WITH FEE(S) Page 2 of 3												
PTOL-85 (Rev.07-01) Appn	oved for use thre	ough 01/31/2004. C	OMB 0651-0033		0. 3	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE						

05/20/2009 SZEWDIE2 00000011 10785110

01 FC:1501 02 FC:1504 03 FC:8001 1510.00 OP 300.00 OP 9.00 OP

## PART B - ISSUE FEE (S) TRANSMITTAL

Complete and mai this form, together with applicable fees, to: MAY 1 9 2009

**Box ISSUE FEE Assistant Commissioner for Patents** Washington, D.C. 20231

WHI ING INSTRUCTION IS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including a parameter of the first of the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s Transmittal. This certificate cannot be used for any other accompanying papers. Each

REED SMITH LLP **SUITE 1400** 3110 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate

Certificate of Mailing

I hereby certify that this Issue Fee(s) Transmittal is being deposited with the United States
Postal Service with sufficient postage for first class mail in an envelop addressed to the Box
Issue Fee address on the date indicated below.

						Г			(Depositor's name)			
									(Signature)			
						ŀ			(Date)			
APPLICATION NO		FILIN	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.			
10/785,110 02/2			25/2004		Yusaku Yamamoto		NIT	Γ.0193	8797			
TITLE OF INVENTION:	Parall	EL FAST FO	OURIER TR.	ANSFORM	IATION M	ІЕТНОД О	F CONCEALED-C	COMMUNICATI	ON TYPE			
APPLN. TYPE	SMALL E	NTITY	ISSUE FEE			N FEE	TOTAL FEE(S) DUE DATE DUE					
nonprovisional	provisional NO		\$1,510		\$300		\$1,810 06/10/2009					
EXAMINER	EXAMINER			CLASS - SU	JBCLASS							
NGO, CHUONG D.		·	2193	708-401	1000							
Change of correspondence	ce address or		Address" (37 Cl	FR §1.363). U		2. For printi	ng on the patent front page	e, list (1)				
form(s) and Customer No	umber are rec	commended, but not	required.				up to 3 registered patent a		Reed Smith LLP			
☐ Change of corresponditached.	☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122)							or agents OR, alternatively, (2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to 2  2. Juan Carlos A, Marquez, Esq.				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.							registered patent attorneys or agents. If no name is listed, no name will be printed					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)												
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment.												
(A) NAME OF ASSIGN	•	•			•		IDENCE: (CITY and STAT	F OR COUNTRY)				
Hitachi, Ltd.							Tokyo, Japan					
,							,					
Please check the approp		e category (will not	be printed on the	patent) 🛘 indivi	idual 🗵		private group entity	☐ government				
4a. The following fees are	enciosed.		•			•	b. Payment of Fee(s):					
☑ Publication Fee				$\boxtimes$			A check in the amount of the fee(s) is enclosed.					
☑ Advance Order - # of C				□ Payme	ent by credit card. Form PTO-2038 is attached.							
						ne Commissioner is hereby authorized by charge the required fee(s), or						
						credit any overpayment, to Deposit Account Number 08-1480 (enclose an extra copy of this form).						
The COMMISSIONER OF PA	ATENTS AN	D TRADEMARKS	is requested to app	ly the Issue Fee	and Publicatio	n Fee (if any) to	the application identified at	ove.				
(Authorized Signature)		(Da	te) May 19,	2009								
		$\alpha$	A [] ]	1/	_	-						
		$\mathcal{A}$	1 / A		_	$\rightarrow$						
Juan Carlos A. Marque NOTE: The Issue Fee and Publ registered patent attorney or ag Trademark Office	lication Fee (	if required) will not					~					
Burden Hour Statement: This f of the individual case. Any cor Chief Information Officer, Uni FEES OR COMPLETED FOR Assistant Commissioner for Pa Under the Paperwork Reductio displays a valid OMB control r	omments on the ited States Park MS TO THIS atents, Washir on Act of 1995	te amount of time re tent and Trademark S ADDRESS. SEN ington, D.C. 20231	quired to complete Office, Washingto D FEES AND TH	e this form shou on, D.C. 20231. IS FORM TO: I	ND							
				TRANS	MIT THIS FO	RM WITH FEE	(S)					

Page 2 of 3

PTOL-85 (Rev.07-01) Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE